PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 OG/SI4 16												
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE		OTHER THAN	
TOTAL CLAIMS			65					RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			65 minus 20=		· 45			X\$ 9=	405	OR	X\$18=	
INDEPENDENT CLAIMS			U minus 3 =					X40=	40	OR	X80=	7
MULTIPLE DEPENDENT CLAIM PRESENT								+135≈		OR	+270=	
* If the difference in column 1 is less than zero, enter *0" in column 2						1	TOTAL	800	OR	TOTAL	# #	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL		OR	OTHER SMALL I	
		(Column 1) CLAIMS		HIGH		(Column 3)	1		ADDI-	ر ا		ADDI-
AMENDMENT A	and the	REMAINING AFTER AMENDMENT	ار د اید دیا	NUM PREVIO PAIO	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		PATE	TIONAL FEE
	Total	.90	Minus	16	5	.5		X\$ 9=		OR	X\$18=	40
AME	Independent	.5	Minus	··· <	6	· /_		X40≖		OR	X80=	37
	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	ENDEN	CLAIM		,	+135=		OR	+270=	
	-10/-							TOTAL		OR	TOTAL ADDIT, FEE	
(8/9/5	(Column 1)		(Colu	nn 2)	(Column 3)		ADOIT, FEE			A0011. 1 CE	
AMENDMENT 8		CLAIMS REMAINING AFTER AMENDMENT	23.	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	40	Minus	1	D	-/]	X\$ 9=		OR	XS18=	
	Independent	NTATION OF M	Minus	5	· CI AINI	<u>⊬</u>	┦┃	X40≖		OR	X80=	
	PINST PRESE	NIASON OF MI	JETIPLE GEP	ENDENT	CLAIM		ا د	+135=		OR	+270=	
							•	TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)	•	(Colur	nn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENOMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA] [RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=	
ME	independent	•	Minus	•••		•]	X40=			X80=	
⋖	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM]	740-		OR		
	(the eater is action	me 1 is loca three 4	ha anto: in act.	ma 2	ugo in and	homa 3		+135=		OR	+270=	
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE												
		iber Previously Pa					er fou	end in the app	propriate box	x in co	lumn 1,	

Application or Docket Number